

FCHS-Aco	Commissioner for Patents Washington, D.C. 20231 Sir: Kindly acknowledge receipt of the acceptance of	pages, with Transmittal Form Sheet sheets er of Attorney informal drawings ling fee) d Check for \$ \$ CPA) k for \$ creen and mailing or returning to deliverer. al	
Fitzpatrick, Cella, Harper P.T.O. ACCOUNT 30 ROCKEFELLER PLAZA NEW YORK, NY 10112 PAY CHECK NO. TO THE ORDER OF COMMISSIONER OF PATENTS AND	red ten & 0/100	REMITTANCE ADVICE 1-2/210	_A MO
		FITZPATRICK, CELLA, HARPER & SCINTO	

JPMORGAN CHASE BANK, N.A. 633 THIRD AVENUE NEW YORK, NY 10017

In re Application of:

YUSUKE NAKAZONO, ET AL

Application No.: 10/029,291

Filed: December 28, 2001

Docket No. 03560.002971.

Examiner: V. Rudolph

Group Art Unit: 2625

Date: February 14, 2008

For: INFORMATION PROCESSING APPARATUS, INFORMATION PROCESSING METHOD, PROGRAM, AND STORAGE MEDIUM PRODUCT FOR DISTRIBUTION OF IMAGE FORMING CONTROL SOFTWARE

Mail Stop RCE COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Preliminary Amendment in the above-identified application.

FEB 1 9 2008

X No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	9	MINUS	42	= 0	x \$25 \$50	-0-
INDEP. CLAIMS	2	MINUS	12	= 0	x \$105 \$210	-0-
Fee for Multiple Dependent claims \$185°/\$370						
			TOTAL ADDITI			-0-

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

February 14, 2008
(Date of Deposit)

Michael G. Guzniczak, Reg. No. 59,820
(Name of Attorney for Applicant)

February 14, 2008
mature Date of Signature

	Verified Statement claiming small entity status is enclosed, if not filed previously.			
	A check in the amount of \$ is enclosed.			
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.			
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.			
	A check in the amount of \$ to cover the fee for a month extension is enclosed.			
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.			
X	Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to b directed to our address given below.			
	Respectfully submitted,			
	John John State of the State of			
	Michael J. Guzniczak			
	Attorney for Applicants Registration No.: 59,820			
	110010111111111111111111111111111111111			

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza
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Form #120

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